SEPSIS ADMINISTRATIVE ORDER

Initiate immediate supportive care:

O2 to maintain sat ≥94%

Complete primary and secondary survey indicated

Vital signs including FSBG and temperature (if available)

Cardiac Monitor

Use AO on patients with suspected or documented infection and one or more of the following:

- <u>B</u>lood pressure hypotensive
- Altered Mental Status- GCS <15
- <u>Tachypnea</u>

Initiate 2 large bore IVs, NS/LR TKO or consider saline lock with NS flush

Push all meds slowly

Administer *NS/LR* 30ml/kg bolus, *Max 3L*Reassess vital signs and lung sounds after each 500ml bolus If signs of fluid overload, change rate to TKO

Hold for patients with Renal Failure or CHF, unless hypotensive, Then give NS/LR 500ml bolus only

Notification to include:

Sepsis Administrative Order, unit number, patient age, gender, and ETA to receiving facility.

Advise if patient is unstable.